

PAYMENT BOND (See instructions on reverse)		DATE BOND EXECUTED (Must be same or later than contract)		OMB No. : 9000-0045									
Bond No. 929248045		September 30 2002											
Public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the FAR Secretariat (MVR), Federal Acquisition Policy Division, GSA, Washington, D.C. 20403													
PRINCIPAL (Legal name and business address)		TYPE OF ORGANIZATION (X one)											
Kanasq Construction Company, Inc.		<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> JOINT VENTURE <input checked="" type="checkbox"/> PARTNERSHIP <input checked="" type="checkbox"/> CORPORATION											
3950 Mountain View Drive Anchorage, AK 99508		STATE OF INCORPORATION ALASKA											
SURETY (IES) (Name(s) and business address(es))		PENAL SUM OF BOND											
Western Surety Company		<table border="1"> <tr> <th>MILLION(S)</th> <th>THOUSAND(S)</th> <th>HUNDRED(S)</th> <th>CENTS</th> </tr> <tr> <td></td> <td>709</td> <td>148</td> <td>90</td> </tr> </table>				MILLION(S)	THOUSAND(S)	HUNDRED(S)	CENTS		709	148	90
MILLION(S)	THOUSAND(S)	HUNDRED(S)	CENTS										
	709	148	90										
P.O. Box 5077 Sioux Falls, SD 57117-5077		CONTRACT DATE 09/30/2002 CONTRACT NO. F65301-00-D-0010 Option Year #2											

OBLIGATION:


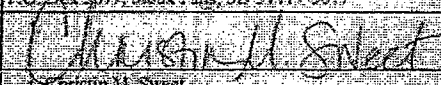
We, the Principal and Surety(ies), are firmly bound to the United States of America (hereinafter called the Government) in the above penal sum. For payment of the penal sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally. However, where the Sureties are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" as well as "severally" only for the purpose of allowing a joint action or actions against any or all of us. For all other purposes, each Surety binds itself, jointly and severally with the Principal, for the payment of the sum shown opposite the name of the Surety. If no limit of liability is indicated, the limit of liability is the full amount of the penal sum.

CONDITIONS:

The above obligation is void if the Principal promptly makes payment to all persons having a direct relationship with the Principal or a subcontractor of the Principal for furnishing labor, material or both in the prosecution of the work provided for in the contract identified above, and any authorized modifications of the contract that subsequently are made. Notice of those modifications to the Surety(ies) are waived.

WITNESS:

The Principal and Surety(ies) executed this payment bond and affixed their seals on the above date.

Kanasq Construction Company, Inc.				PRINCIPAL	
SIGNATURE(S)	1. 	2. (Seal)	3. (Seal)	CORPORATE SEAL	
NAME(S) & TITLE(S) (Type)	1. William Jury President	2.	3.		
INDIVIDUAL SURETY(IES)					
SIGNATURE(S)	1. (Seal)	2. (Seal)			
NAME(S) (Type)	1.	2.			
CORPORATE SURETY(IES)					
SURETY	NAME & ADDRESS	Western Surety Company P.O. Box 5077, Sioux Falls, SD 57117-5077		STATE OF INC.	LIABILITY LIMIT
			SOUTH DAKOTA		\$ 100%
	SIGNATURE(S)			2.	CORPORATE SEAL
NAME(S) & TITLE(S) (Type)	Charles M. Sweet Attorney-in-Fact		2.		

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STANDARD FORM 25A (REV 10-89)
Prescribed by GSA FPMR (41 CFR) 101-11.6

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CORPORATE SURETY(IES) (Continued)					
SURETY	NAME & ADDRESS	STATE OF INC.	LIABILITY LIMIT	CORPORATE SEAL	
	SIGNATURE(S)	1.	2.		
A	NAME(S) & TITLE(S) (Typed)	1.	2.		
	SIGNATURE(S)	1.	2.		
	NAME & ADDRESS	STATE OF INC.	LIABILITY LIMIT		
B	NAME(S) & TITLE(S) (Typed)	1.	2.		
	SIGNATURE(S)	1.	2.		
	NAME & ADDRESS	STATE OF INC.	LIABILITY LIMIT		
C	NAME(S) & TITLE(S) (Typed)	1.	2.		
	SIGNATURE(S)	1.	2.		
	NAME & ADDRESS	STATE OF INC.	LIABILITY LIMIT		
D	NAME(S) & TITLE(S) (Typed)	1.	2.		
	SIGNATURE(S)	1.	2.		
	NAME & ADDRESS	STATE OF INC.	LIABILITY LIMIT		
E	NAME(S) & TITLE(S) (Typed)	1.	2.		
	SIGNATURE(S)	1.	2.		
	NAME & ADDRESS	STATE OF INC.	LIABILITY LIMIT		
F	NAME(S) & TITLE(S) (Typed)	1.	2.		
	SIGNATURE(S)	1.	2.		
	NAME & ADDRESS	STATE OF INC.	LIABILITY LIMIT		
G	NAME(S) & TITLE(S) (Typed)	1.	2.		
	SIGNATURE(S)	1.	2.		
	NAME & ADDRESS	STATE OF INC.	LIABILITY LIMIT		

INSTRUCTIONS

1. This form, for the protection of persons supplying labor and material, is used when a payment bond is required under the Act of August 24, 1935, 49 Stat. 793 (40 U.S.C. 270a-270e). Any deviation from this form will require the written approval of the Administrator of General Services.

2. Insert the full legal name and business address of the Principal in the space designated "Principal" on the face of the form. An authorized person shall sign the bond. Any person signing in a representative capacity (e.g., an attorney-in-fact) must furnish evidence of authority if that representative is not a member of the firm, partnership, or joint venture, or an officer of the corporation involved.

3. (a) Corporations executing the bond as sureties must appear on the Department of the Treasury's list of approved sureties and must act within the limitation listed therein. Where more than one corporate surety is involved, their names and addresses shall appear in the spaces (Surety A, Surety B, etc.) headed "CORPORATE SURETY(IES)." In the space designated

"SURETY(IES)" on the face of the form, insert only the letter identification of the sureties.

(b) Where individual sureties are involved, a completed Affidavit of Individual Surety (Standard Form 28) for each individual surety, shall accompany this bond. The Government may require the surety to furnish additional substantiating information concerning its financial capability.

4. Corporations executing the bond shall affix their corporate seals. Individuals shall execute the bond opposite the word "Corporate Seal" and shall affix an adhesive seal if executed in Maine, New Hampshire, or any other jurisdiction requiring adhesive seals.

5. Type the name and title of each person signing this bond in the space provided.